

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>10/13/01</i>
O.J.P.E. CLASSIFIER	<i>FW</i>	<i>2. 4</i>	
FORMALITY REVIEW		<i>11422</i>	<i>11-15-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected
 = _____ Allowed
 3 - (Through numeral) _____ Canceled
 0+ _____ Restricted
 u _____

N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date	Claim	Date	Claim	Date
1		51		91	
2		52		92	
3		53		93	
4		54		94	
5		55		95	
6		56		96	
7		57		97	
8		58		98	
9		59		99	
10		60		100	
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37		87			
38		88			
39		89			
40		90			
41		91			
42		92			
43		93			
44		94			
45		95			
46		96			
47		97			
48		98			
49		99			
50		100			

If more than 150 claims or 10 actions
staple additional sheet here

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